Armed Forces College of Medicine

AFCM

Psychiatry Department

Psychiatry Revision
Clinical Skills
Year 5
(5+2)

Vignette #1

Mr. X is a 49 year old man presented to the A&E by his best friend. As he reports to him that he bought a gun 2 months ago with the plan to end his life and has the gun in his car. The man reports having made suicide plans with specific timetables to end his life several times over the last 8 weeks, but held back at the last minute. "I cannot live any more with the pain of my wife leaving after divorce (3 months ago). He describes his distress having increased over the

Vignette #1

He reports an extensive history of substance dependence including alcohol, pot and prescription medication that led to his divorce, but that he has been sober for 14 months with the help of a detox and ongoing attendance in AA/NA. He stopped using following an arrest for theft, and a subsequent hospital admission for suicide attempt by overdose on aspirin and alcohol. He admits to beating his wife weekly when they were together; she is in another relationship now and he recently learned of her plans to remarry.

Vignette #1

He has no contact with the daughter from the marriage and is isolated from his own family. During the interview he appears depressed and irritable; he is angry and hostile, especially with female staff. There is no report of sleep or appetite disturbance.

Vignette #1

Which of the following is the best next action from the ER physician?

A- Discharge to the psychiatric Out patient clinic

B- Report to the police

C- Report to the social worker

D- Observe in the ER for the coming 24 hours

E- Ask for psychiatric assessment

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A- Discharge to the psychiatric Out patient clinic

B- Report to the police

C- Report to the social worker

D- Observe in the ER for the coming 24 hours

E- Ask for psychiatric assessment by the on call psychiatrist

Vignette #1

According to <u>SAD PERSONAS</u> scale Which of the following signs would make the ER physician most concerned about a future suicidal attempt?

A- Hypersomnia

B- Loss of weight

C- Availability of lethal means

D- Unstable mood

E- Guilt feelings

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Vignette #1

According to <u>SAD PERSONAS</u> scale What else would make the ER physician most concerned about a future suicidal attempt?

S: Male sex → 1

A: Age >45 years → 1

D: Depression or hopelessness → 2

P: Previous suicidal attempts or psychiatric care → 1

E: Excessive ethanol / drug use → 1

R: Rational thinking loss (psychotic or organic illness)

S: Single, widowed or divorced → 1

O: Organized or serious attempt → 2

N: No social support → 1

A: Availability of Lethal Means→ 2

S: Stated future intent (determined to repeat or ambivalent) → 2

THE SAD PERSONAS Scale

The score is calculated from eleven yes/no questions, with points given for each affirmative answer as
follows:

S: Male sex → 1

A: Age 19-25 or >45 years → 1

D: Depression or hopelessness → 2

P: Previous suicidal attempts or psychiatric care → 1

E: Excessive ethanol / drug use → 1

R: Rational thinking loss (psychotic or organic illness) → 2

S: Single, widowed or divorced → 1

O: Organized or serious attempt → 2

N: No social support → 1

A: Availability of Lethal Means→ 2

S: Stated future intent (determined to repeat or ambivalent) → 2

This score is then mapped onto a risk assessment scale as follows:

0–5: May be safe to discharge (depending upon circumstances)

6-8: Probably requires psychiatric consultation

>8: Probably requires hospital admission

Vignette #2

An emaciated 26-year-old man is brought to the emergency room by the local police. The police tell the psychiatrist on call that the man was preaching loudly at a nearby busy intersection, sometimes walking into traffic to approach drivers while dressed only in a thin robe despite the freezing temperatures. On interview, the psychiatrist notes that the man displays delusions of special connections to God and discounts any concern for his physical safety, as he will leave his fate to God. The patient refuses voluntary admission, stating that he must get .back to his divine mission

Vignette #2

On what grounds would the emergency room psychiatrist
be most justified in hospitalizing the patient ?involuntarily

A. The patient is so disorganized mentally as he will harm himself
B. The patient is suffering from acute psychosis.
C. The patient is at risk for causing harm to other people.
D. The patient's psychiatric disorder is likely to worsen in the future without treatment.
E. The patient's behavior could be interpreted as actively suicidal.

Vignette #2

On what grounds would the emergency room psychiatrist
be most justified in hospitalizing the patient ?involuntarily

- ***A. The patient is so disorganized mentally as he will harm himself***
- ***B. The patient is suffering from acute psychosis.***
- ***C. The patient is at risk for causing harm to other people.***
- ***D. The patient's psychiatric disorder is likely to worsen in the future without treatment.***
- ***E. The patient's behavior could be interpreted as actively suicidal.***

Vignette #2

Four years later after complete resolution of his psychotic symptoms and stoppage of all psychotropics and he became completely funcioning. The patient developed moderate anxiety and his psychiatrist prescribed antianxiety medication after describing the huge benefits of such medications and offer psychotherapy session as an alternative treatment

Vignette #2

Which of the following data did the psychiatrist forget to add to take a fully informed consent ?from the above patient

A. Giving the patient time to think and come back
B. Threatening the patient by hospitalization if not received the medication
C. Asking the patient if he has any information about the medication
D. Listing & educating the patient about the possible side effect of medication
E. Asking the patient if he needs a support from a family member


Thank you
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